

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.
Varian Medical Systems, Inc. PAC ('Varian PAC')

ADDRESS (number and street)
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)

(b) Monthly Report Due On:

Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)

Election on / / in the State of

(d) 30-Day POST-Election Report for the:

General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period / / through / /

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Maureen Zilly Tracy

Signature of Treasurer Maureen Zilly Tracy [Electronically Filed] Date / /

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Varian Medical Systems, Inc. PAC ('Varian PAC')

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>		10406.15
(b) Cash on Hand at Beginning of Reporting Period.....	1077.15	
(c) Total Receipts (from Line 19)	3426.00	45597.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	4503.15	56003.15
7. Total Disbursements (from Line 31).....	0.00	51500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	4503.15	4503.15
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Varian Medical Systems, Inc. PAC ('Varian PAC')

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A).....	3270.00	35620.00
(ii) Unitemized	156.00	9977.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)..... ▶	3426.00	45597.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	3426.00	45597.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	3426.00	45597.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	3426.00	45597.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	51500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	0.00	51500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0.00	51500.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	3426.00	45597.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3426.00	45597.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 22
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Varian Medical Systems, Inc. PAC ('Varian PAC')

A. Keith Askoff
Full Name (Last, First, Middle Initial)

Mailing Address 324 Mercy St.
26th Floor

City Mountain View State CA Zip Code 94041-2204

FEC ID number of contributing federal political committee. **C**

Name of Employer Varian Medical Systems Occupation Associate General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
520.00

Date of Receipt
12 / 31 / 2014
Transaction ID : PR1833140638794

Amount of Each Receipt this Period
60.00

P/R Deduction (\$20.00 Bi-Weekly)

B. David Bisciotti
Full Name (Last, First, Middle Initial)

Mailing Address 5025 Brent Knoll Ln

City Suwanee State GA Zip Code 30024-1377

FEC ID number of contributing federal political committee. **C**

Name of Employer Varian Medical Systems Occupation Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
12 / 31 / 2014
Transaction ID : PR1980198138794

Amount of Each Receipt this Period
30.00

P/R Deduction (\$10.00 Bi-Weekly)

C. Douglas Carlisle
Full Name (Last, First, Middle Initial)

Mailing Address 11714 Littler Rd

City Sandy State UT Zip Code 84092-5762

FEC ID number of contributing federal political committee. **C**

Name of Employer Varian Medical Systems Occupation Sr Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
12 / 31 / 2014
Transaction ID : PR1980198238794

Amount of Each Receipt this Period
30.00

P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 120.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 22
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Varian Medical Systems, Inc. PAC ('Varian PAC')

A. Gayle Cichocki
Full Name (Last, First, Middle Initial)
Mailing Address 386 Chadwick Cir
City Henderson State NV Zip Code 89014-4523
FEC ID number of contributing federal political committee. **C**
Name of Employer Varian Medical Systems Occupation National Tech Supply Specialist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2014
Transaction ID : PR1980198338794
Amount of Each Receipt this Period 300.00
P/R Deduction (\$10.00 Bi-Weekly)

B. Catherine Deluca
Full Name (Last, First, Middle Initial)
Mailing Address 304 Oconnor St
City Menlo Park State CA Zip Code 94025-2663
FEC ID number of contributing federal political committee. **C**
Name of Employer Varian Medical Systems Occupation Manager, Accounting
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 980.00

Date of Receipt 12 / 31 / 2014
Transaction ID : PR1980198438794
Amount of Each Receipt this Period 150.00
P/R Deduction (\$50.00 Bi-Weekly)

C. Robert Drubka
Full Name (Last, First, Middle Initial)
Mailing Address 5250 S Rainbow Bl #1145
City Las Vegas State NV Zip Code 89118-0630
FEC ID number of contributing federal political committee. **C**
Name of Employer Varian Medical Systems Occupation General Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 12 / 31 / 2014
Transaction ID : PR1980198538794
Amount of Each Receipt this Period 150.00
P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	330.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 22
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Varian Medical Systems, Inc. PAC ('Varian PAC')

A. Anna Emmons
Full Name (Last, First, Middle Initial)

Mailing Address 24 Aliso Wy

City Menlo Park State CA Zip Code 94028-7527

FEC ID number of contributing federal political committee. **C**

Name of Employer Varian Medical Systems Occupation Human Resources

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

Date of Receipt 12 / 31 / 2014
Transaction ID : PR1980198738794

Amount of Each Receipt this Period 30.00

P/R Deduction (\$10.00 Bi-Weekly)

B. Carlos Garces
Full Name (Last, First, Middle Initial)

Mailing Address 11760 NW 27th St

City Plantation State FL Zip Code 33323-1856

FEC ID number of contributing federal political committee. **C**

Name of Employer Varian Medical Systems Occupation Customer Support Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2014
Transaction ID : PR1980198838794

Amount of Each Receipt this Period 30.00

P/R Deduction (\$10.00 Bi-Weekly)

C. Robert Gemperline
Full Name (Last, First, Middle Initial)

Mailing Address 710 Chestnut Ct

City Algonquin State IL Zip Code 60102-2118

FEC ID number of contributing federal political committee. **C**

Name of Employer Varian Medical Systems Occupation SW Engineer IV

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2014
Transaction ID : PR1980199038794

Amount of Each Receipt this Period 30.00

P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 22
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Varian Medical Systems, Inc. PAC ('Varian PAC')

A. Jon Hollon
Full Name (Last, First, Middle Initial)
Mailing Address 322 Karen Av #3006
City Las Vegas State NV Zip Code 89109-0445
FEC ID number of contributing federal political committee. **C**
Name of Employer Varian Medical Systems Occupation Director, Worldwide Training and Educa
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 780.00

Date of Receipt 12 / 31 / 2014
Transaction ID : PR1980199138794
Amount of Each Receipt this Period 90.00
P/R Deduction (\$30.00 Bi-Weekly)

B. David Hurlock
Full Name (Last, First, Middle Initial)
Mailing Address 2045 Ashburton Way
City Mount Pleasant State SC Zip Code 29466-6877
FEC ID number of contributing federal political committee. **C**
Name of Employer Varian Medical Systems Occupation Manager, Sales
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2014
Transaction ID : PR1980199238794
Amount of Each Receipt this Period 30.00
P/R Deduction (\$10.00 Bi-Weekly)

C. Theodore Jackson
Full Name (Last, First, Middle Initial)
Mailing Address 2142 Oak Forest Dr
City Ellicott City State MD Zip Code 21043-1966
FEC ID number of contributing federal political committee. **C**
Name of Employer Varian Medical Systems Occupation Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2014
Transaction ID : PR1980199338794
Amount of Each Receipt this Period 30.00
P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 OF 22
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Varian Medical Systems, Inc. PAC ('Varian PAC')

Full Name (Last, First, Middle Initial)
A. Stacy June

Mailing Address 174 Mosby Woods Dr

City Newnan State GA Zip Code 30265-2212

FEC ID number of contributing federal political committee. **C**

Name of Employer Varian Medical Systems Occupation Manager II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1980199438794

Amount of Each Receipt this Period
30.00

P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. Mark Kaye

Mailing Address 1830 High Trail

City Atlanta State GA Zip Code 30339-8470

FEC ID number of contributing federal political committee. **C**

Name of Employer Varian Medical Systems Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1980199538794

Amount of Each Receipt this Period
30.00

P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
c. Ching Clifton Ling

Mailing Address 345 E 69th Street, PH E

City New York State NY Zip Code 10021-5595

FEC ID number of contributing federal political committee. **C**

Name of Employer Varian Medical Systems Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **580.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1980199638794

Amount of Each Receipt this Period
30.00

P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	90.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 22
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Varian Medical Systems, Inc. PAC ('Varian PAC')

A. Stanley Mansfield
Full Name (Last, First, Middle Initial)

Mailing Address 1137 S Bernardo Ave

City Sunnyvale State CA Zip Code 94087-2057

FEC ID number of contributing federal political committee. **C**

Name of Employer Varian Medical Systems Occupation Sr Manager, Research Science

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt **12 / 31 / 2014**

Transaction ID : PR1980199738794

Amount of Each Receipt this Period **30.00**

P/R Deduction (\$10.00 Bi-Weekly)

B. David Nisius
Full Name (Last, First, Middle Initial)

Mailing Address 315 Stafford Rd

City Des Plaines State IL Zip Code 60016-2109

FEC ID number of contributing federal political committee. **C**

Name of Employer Varian Medical Systems Occupation Engineer Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1700.00**

Date of Receipt **12 / 31 / 2014**

Transaction ID : PR1980199838794

Amount of Each Receipt this Period **150.00**

P/R Deduction (\$50.00 Bi-Weekly)

c. Mary O'Byrne
Full Name (Last, First, Middle Initial)

Mailing Address 290 Live Oak Ln

City Los Altos State CA Zip Code 94022-2175

FEC ID number of contributing federal political committee. **C**

Name of Employer Varian Medical Systems Occupation VP, Associate General Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt **12 / 31 / 2014**

Transaction ID : PR1980199938794

Amount of Each Receipt this Period **30.00**

P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **210.00**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 22
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Varian Medical Systems, Inc. PAC ('Varian PAC')

A. Alan Palter
Full Name (Last, First, Middle Initial)

Mailing Address 2035 Queens Lane

City San Mateo State CA Zip Code 94402-3930

FEC ID number of contributing federal political committee. **C**

Name of Employer Varian Medical Systems Occupation Senior Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
12 / 31 / 2014
Transaction ID : PR1980200038794

Amount of Each Receipt this Period 30.00

P/R Deduction (\$10.00 Bi-Weekly)

B. Mark Patzer
Full Name (Last, First, Middle Initial)

Mailing Address 424 3rd Ln S

City Kirkland State WA Zip Code 98033-6610

FEC ID number of contributing federal political committee. **C**

Name of Employer Varian Medical Systems Occupation Sales Representative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt
12 / 31 / 2014
Transaction ID : PR1980200138794

Amount of Each Receipt this Period 75.00

P/R Deduction (\$25.00 Bi-Weekly)

C. Michael Petrillo
Full Name (Last, First, Middle Initial)

Mailing Address 7910 Boothill Drive

City Park City State UT Zip Code 84098-5394

FEC ID number of contributing federal political committee. **C**

Name of Employer Varian Medical Systems Occupation Sr Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
12 / 31 / 2014
Transaction ID : PR1980200238794

Amount of Each Receipt this Period 30.00

P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 135.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 22
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Varian Medical Systems, Inc. PAC ('Varian PAC')

A. Jeff Shue
Full Name (Last, First, Middle Initial)

Mailing Address 2721 NW 78th St

City Topeka State KS Zip Code 66618-2107

FEC ID number of contributing federal political committee. **C**

Name of Employer: Varian Medical Systems Occupation: Product Spt Engineer IV

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt: 12 / 31 / 2014
Transaction ID : PR1980200538794

Amount of Each Receipt this Period: **30.00**

P/R Deduction (\$10.00 Bi-Weekly)

B. Stacy Stordahl
Full Name (Last, First, Middle Initial)

Mailing Address 2611 Ross Rd

City Chevy Chase State MD Zip Code 20815-3834

FEC ID number of contributing federal political committee. **C**

Name of Employer: Varian Medical Systems Occupation: Director Policy & Reimbursement

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **520.00**

Date of Receipt: 12 / 31 / 2014
Transaction ID : PR1980200638794

Amount of Each Receipt this Period: **60.00**

P/R Deduction (\$20.00 Bi-Weekly)

C. Tracy Ting
Full Name (Last, First, Middle Initial)

Mailing Address 10954 Stevens Canyon Rd

City Cupertino State CA Zip Code 95014-3944

FEC ID number of contributing federal political committee. **C**

Name of Employer: Varian Medical Systems Occupation: Sr Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1450.00**

Date of Receipt: 12 / 31 / 2014
Transaction ID : PR1980200838794

Amount of Each Receipt this Period: **0.00**

P/R Deduction (\$0.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **90.00**

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 22
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Varian Medical Systems, Inc. PAC ('Varian PAC')

Full Name (Last, First, Middle Initial)
A. Maureen Tracy

Mailing Address 520 N Charter Street

City Monticello State IL Zip Code 61856-1170

FEC ID number of contributing federal political committee. **C**

Name of Employer: Varian Medical Systems Occupation: Director Federal Affairs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1300.00**

Date of Receipt: **12 / 31 / 2014**

Transaction ID : PR1980200938794

Amount of Each Receipt this Period: **150.00**

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. Gary Virshup

Mailing Address 753 Stendhal Ln

City Cupertino State CA Zip Code 95014-4658

FEC ID number of contributing federal political committee. **C**

Name of Employer: Varian Medical Systems Occupation: Director, Research Science

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **760.00**

Date of Receipt: **12 / 31 / 2014**

Transaction ID : PR1980201038794

Amount of Each Receipt this Period: **30.00**

P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. Andrew Whitman

Mailing Address 704 Hatherleigh Rd

City Baltimore State MD Zip Code 21212-1613

FEC ID number of contributing federal political committee. **C**

Name of Employer: Varian Medical Systems Occupation: Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **3250.00**

Date of Receipt: **12 / 31 / 2014**

Transaction ID : PR1980201238794

Amount of Each Receipt this Period: **375.00**

P/R Deduction (\$125.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ► **555.00**

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 22
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Varian Medical Systems, Inc. PAC ('Varian PAC')

A. Robert Wood
Full Name (Last, First, Middle Initial)

Mailing Address 56 Centennial Way

City San Ramon State CA Zip Code 94583-2615

FEC ID number of contributing federal political committee. **C**

Name of Employer Varian Medical Systems Occupation VP, Ops Manufacturing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt
12 / 31 / 2014
Transaction ID : PR1980201438794

Amount of Each Receipt this Period
30.00

P/R Deduction (\$10.00 Bi-Weekly)

B. Julie Yuan
Full Name (Last, First, Middle Initial)

Mailing Address 816 Killarney Ct

City Sunnyvale State CA Zip Code 94087-4864

FEC ID number of contributing federal political committee. **C**

Name of Employer Varian Medical Systems Occupation Controller V

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt
12 / 31 / 2014
Transaction ID : PR1980201638794

Amount of Each Receipt this Period
30.00

P/R Deduction (\$10.00 Bi-Weekly)

C. Corey Zankowski
Full Name (Last, First, Middle Initial)

Mailing Address 1641 Kirk Ct

City San Jose State CA Zip Code 95124-4800

FEC ID number of contributing federal political committee. **C**

Name of Employer Varian Medical Systems Occupation Sr Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt
12 / 31 / 2014
Transaction ID : PR1980201738794

Amount of Each Receipt this Period
30.00

P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **90.00**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 22
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Varian Medical Systems, Inc. PAC ('Varian PAC')

A. George Zentai
Full Name (Last, First, Middle Initial)

Mailing Address 1054 Blackfield Way

City Mountain View State CA Zip Code 94040-2303

FEC ID number of contributing federal political committee. **C**

Name of Employer Varian Medical Systems Occupation Sr Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1980201838794

Amount of Each Receipt this Period
30.00

P/R Deduction (\$10.00 Bi-Weekly)

B. Josh Star-Lack
Full Name (Last, First, Middle Initial)

Mailing Address 902 Van Auken Circle

City Palo Alto State CA Zip Code 94303-3841

FEC ID number of contributing federal political committee. **C**

Name of Employer Varian Medical Systems Occupation Ginzton Tech Ctr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1981204338794

Amount of Each Receipt this Period
45.00

P/R Deduction (\$15.00 Bi-Weekly)

C. Jon Hopkins
Full Name (Last, First, Middle Initial)

Mailing Address 1314 Featherwood Drive

City Murphy State TX Zip Code 75094-4174

FEC ID number of contributing federal political committee. **C**

Name of Employer Varian Medical Systems Occupation World Wide Sales - Particle Therapy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR2016511038794

Amount of Each Receipt this Period
150.00

P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **225.00**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 17 OF 22
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Varian Medical Systems, Inc. PAC ('Varian PAC')

A. John Kowal
Full Name (Last, First, Middle Initial)

Mailing Address 1905 Big Bend Cove

City Southlake State TX Zip Code 76092-6933

FEC ID number of contributing federal political committee. **C**

Name of Employer: Varian Medical Systems Occupation: Field Sales VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt: **12 / 31 / 2014**

Transaction ID : PR2016511138794

Amount of Each Receipt this Period: **75.00**

P/R Deduction (\$25.00 Bi-Weekly)

B. Richard Vansaun
Full Name (Last, First, Middle Initial)

Mailing Address 1 Daffodil Lane

City Medway State MA Zip Code 02053-6201

FEC ID number of contributing federal political committee. **C**

Name of Employer: Varian Medical Systems Occupation: Regional Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt: **12 / 31 / 2014**

Transaction ID : PR2016511238794

Amount of Each Receipt this Period: **30.00**

P/R Deduction (\$10.00 Bi-Weekly)

C. James Burke
Full Name (Last, First, Middle Initial)

Mailing Address 522 East First Avenue No3

City Salt Lake City State UT Zip Code 84103-2980

FEC ID number of contributing federal political committee. **C**

Name of Employer: Varian Medical Systems Occupation: Mechanical Engineer IV

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **520.00**

Date of Receipt: **12 / 31 / 2014**

Transaction ID : PR2021049138794

Amount of Each Receipt this Period: **60.00**

P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **165.00**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 22
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Varian Medical Systems, Inc. PAC ('Varian PAC')

A. Lea-Phane Cheng
Full Name (Last, First, Middle Initial)
Mailing Address 35 Kootenai Court
City Fremont State CA Zip Code 94539-6807
FEC ID number of contributing federal political committee. **C**
Name of Employer Varian Medical Systems Occupation Sr Mgr, Budget/Finance
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2014
Transaction ID : PR2021049238794
Amount of Each Receipt this Period 30.00
P/R Deduction (\$10.00 Bi-Weekly)

B. Richard Colbeth
Full Name (Last, First, Middle Initial)
Mailing Address 1243 Richardson Ave
City Los Altos State CA Zip Code 94024-6034
FEC ID number of contributing federal political committee. **C**
Name of Employer Varian Medical Systems Occupation VP, R&D & Engineering
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1040.00

Date of Receipt 12 / 31 / 2014
Transaction ID : PR2021049338794
Amount of Each Receipt this Period 120.00
P/R Deduction (\$40.00 Bi-Weekly)

C. Jill Hass
Full Name (Last, First, Middle Initial)
Mailing Address 848 E Frisbie Way
City Salina State KS Zip Code 67401-9261
FEC ID number of contributing federal political committee. **C**
Name of Employer Varian Medical Systems Occupation Clinicl Implmnt Cnslt IV
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2014
Transaction ID : PR2021049638794
Amount of Each Receipt this Period 30.00
P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 180.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 19 OF 22
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Varian Medical Systems, Inc. PAC ('Varian PAC')

A. Patrick Joda
Full Name (Last, First, Middle Initial)

Mailing Address 5192 Independence Drive

City Pleasanton	State CA	Zip Code 94566-7803
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Varian Medical Systems	Occupation VP, OS Cust Svc Spt
--	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **520.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2014

Transaction ID : PR2021049738794

Amount of Each Receipt this Period

60.00

P/R Deduction (\$20.00 Bi-Weekly)

B. Richard LaFave
Full Name (Last, First, Middle Initial)

Mailing Address 2790 Bellini Dr

City Henderson	State NV	Zip Code 89052-3164
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Varian Medical Systems	Occupation Project (Design) Mgr IV
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2014

Transaction ID : PR2021049838794

Amount of Each Receipt this Period

30.00

P/R Deduction (\$10.00 Bi-Weekly)

C. Richard Lerma
Full Name (Last, First, Middle Initial)

Mailing Address 42926 Joshua Tree Court

City Murrieta	State CA	Zip Code 92562-8949
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Varian Medical Systems	Occupation Mgr II, Field Service (CSS)
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2014

Transaction ID : PR2021049938794

Amount of Each Receipt this Period

30.00

P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	120.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 20 OF 22
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Varian Medical Systems, Inc. PAC ('Varian PAC')

Full Name (Last, First, Middle Initial)
A. Lawrence Lindberg

Mailing Address 3162 Stardust Street

City State Zip Code
 Rocklin CA 95677-1724

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 Varian Medical Systems Director, Prog Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014

Transaction ID : PR2021050038794

Amount of Each Receipt this Period
 30.00

P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. Stavros Prionas

Mailing Address 180 Leland Ave

City State Zip Code
 Menlo Park CA 94025-6163

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 Varian Medical Systems Clinical Trning Splst IV

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014

Transaction ID : PR2021050238794

Amount of Each Receipt this Period
 30.00

P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. Vy Tran

Mailing Address 367 Santana Heights no 5038

City State Zip Code
 San Jose CA 95128-2096

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 Varian Medical Systems VP, Regulatory Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 520.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014

Transaction ID : PR2021050338794

Amount of Each Receipt this Period
 60.00

P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 120.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 21 OF 22
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Varian Medical Systems, Inc. PAC ('Varian PAC')

Full Name (Last, First, Middle Initial)
A. Vitali Tupikov

Mailing Address 555 Chester Ct West

City Aurora State IL Zip Code 60504-5229

FEC ID number of contributing federal political committee. **C**

Name of Employer: Varian Medical Systems Occupation: Electrical Engineer IV

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt: **12 / 31 / 2014**

Transaction ID : PR2021050438794

Amount of Each Receipt this Period: **300.00**

P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. Carl LaCasce

Mailing Address 5074 Red Fox Court

City Park City State UT Zip Code 84098-7568

FEC ID number of contributing federal political committee. **C**

Name of Employer: Varian Medical Systems Occupation: VP General Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **900.00**

Date of Receipt: **12 / 31 / 2014**

Transaction ID : PR20202643938794

Amount of Each Receipt this Period: **150.00**

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. Michael Ryberg

Mailing Address 53 Essex Lane

City Irvine State CA Zip Code 92620-0241

FEC ID number of contributing federal political committee. **C**

Name of Employer: Varian Medical Systems Occupation: VP Global Supply Chain

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **900.00**

Date of Receipt: **12 / 31 / 2014**

Transaction ID : PR20202644238794

Amount of Each Receipt this Period: **150.00**

P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	330.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 22 OF 22
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Varian Medical Systems, Inc. PAC ('Varian PAC')

A. James Suffoletta
 Full Name (Last, First, Middle Initial)
 Mailing Address 604 Indian Home Rd.
 City Danville State CA Zip Code 94526-4365
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Varian Medical Systems Director Marketing
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 900.00

Date of Receipt
 12 / 31 / 2014
Transaction ID : PR2202644338794
 Amount of Each Receipt this Period
 150.00
 P/R Deduction (\$50.00 Bi-Weekly)

B. Edward Vertatschitsch
 Full Name (Last, First, Middle Initial)
 Mailing Address 250 Oakview Drive
 City San Carlos State CA Zip Code 94070-4537
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Varian Medical Systems Sr Dir General Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 720.00

Date of Receipt
 12 / 31 / 2014
Transaction ID : PR2202644438794
 Amount of Each Receipt this Period
 120.00
 P/R Deduction (\$40.00 Bi-Weekly)

C. Aimee Bennett
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 15768
 City Washington State DC Zip Code 20003-0768
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Varian Medical Systems Director, Intl Programs
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 12 / 31 / 2014
Transaction ID : PR2261512538794
 Amount of Each Receipt this Period
 0.00
 P/R Deduction (\$0.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	270.00
TOTAL This Period (last page this line number only).....	3270.00